

**STRUCTURAL PEST CONTROL BOARD**

1418 HOWE AVENUE, SUITE 18 SACRAMENTO, CA 95825
Telephone Number:

Examination/Licensing /Records Storage (916) 561-8704

FAX (916) 263-2469
www.pestboard.ca.gov

**NOTICE OF DUAL EMPLOYMENT**

(To be filed by licensee)

FOR BOARD USE ONLY

Effective Date	Checked by
License No.	

PLEASE PRINT OR TYPE

Name of Licensee	License Number(s)
Residence Address	Telephone Number
(City) (State) (Zip Code)	Area Code ()
Signature of Licensee	Date
Please indicate which address you wish to use for mailing purposes:	
<input type="checkbox"/> Residence <input type="checkbox"/> Business	
CURRENT EMPLOYER	Date employed
Principal Office Address	Principle Registration Number
(City) (State) (Zip Code)	
Signature of Employer	
SECONDARY EMPLOYER	Date employed
Principal Office Address	Principle Registration Number
(City) (State) (Zip Code)	
Signature of New Employer	Date